NAME OF EVENT

## COORDINATORS CHECK LIST FOR A TEMPORARY EVENT THOMAS JEFFERSON HEALTH DISTRICT

By providing the information below, you will assist in identifying and preventing potential public health problems that might occur during your event. Each food vendor that proposes to work your event must submit a separate Temporary Restaurant Application. These applications need to be submitted within 7-10 days of a recognized event and all can be submitted through our district office in Charlottesville, or any of our local county offices. For additional information you can call our district office in Charlottesville at 434-972-6259; 972-6221 (fax).

Copies of the Temporary Restaurant Application, as well as a guideline document that lists what is needed in order to obtain a food permit, can be obtained from any of our local offices or by accessing our web site: http://www.vdh.virginia.gov/LHD/tj/index.asp.

2. DATES(S) OF EVENT			
3. EVENT LOCATION _	3. EVENT LOCATION		
4. NAME OF EVENT COORDINATOR AND OTHER RESPONSIBLE INDIVIDUALS:			
<u>Name</u>	<u>Address</u>	Phone Numbers/Work & Home	
5. NUMBER OF ANTICIPATED FOOD BOOTHS			
6. ATTACH A LIST OF PROPOSED FOOD BOOTH PARTICIPANTS.			
7. TIME OF EVENT SET	7. TIME OF EVENT SET-UP TIME EVENT STARTS		
8. SOURCE OF WATER SUPPLY(Show the location of all water risers on the site plan layout.)			
9. WASTEWATER AND SEWAGE DISPOSAL FACILITIES SOURCE			
Will chemical toilets be used, and if so how many are proposed			
10. GARBAGE DISPOSAL METHOD			
11. SOURCE FOR ICE (IF PROVIDED BY ORGANIZER)			

RESTROOM FACILITIES, WATER RISER, TRASH CO	•
Name of Applicant	Date